

Rpt Type	Rptg Group (Dept.)	System	Plan	Report Period	Employer Name													Page			
R																					
Member Information					Earnings Information																
					Earning Period	Status	Compensation	Member Contributions	Employer Contributions	Hours/ Days	Begin Date				End Date						
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
SSN:		Name:																			
Gender:		Birth:		Type:																	
(DRS PRELSUPP 6/96)					Page Total									1. Insert this form into the prelist where you need extra pages. 2. Change preprinted page numbers on the prelist as needed. 3. Enter page, plan, and system totals on this page as needed.							
					Plan Total																
					System Total																

Blank page